

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SML		10-31-93
O.I.P.E. CLASSIFIER			10-31-93
FORMALITY REVIEW	69300		

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	N	11/1/93
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31	N		
1 22	✓	=	11/1/93
2 23	✓	1	=
3 24	✓		
4 25	0		
6 26	0		
7 27	0		
5 28	0		
8 30	✓		
9 31	✓		
10 32	✓		
11 33	✓		
12 34	✓	3	-
35	N		
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Claim	Final	Original	Date
51	N		11/1/93
52			
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54	N		
13 55	✓	✓	=
14 56	✓	✓	=
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here